



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
CHARLES J. KROGMEIER, DIRECTOR

## INFORMATIONAL LETTER NO. 952

**DATE:** October 6, 2010

**TO:** Home Health Agencies, Targeted Case Management (TCM), Case Management (CM) and DHS Service (SW)

**FROM:** Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

**RE:** Medical Social Services, Targeted Case Management, Case Management and DHS Service for Medicaid Members Receiving Home and Community Based Services Waiver

Medical Social Services (MSS) is a service provided by Medicare-certified home health agencies. When medically necessary, it is a benefit offered through the Iowa Medicaid State Plan to Medicaid members in a physician approved home health plan of care.

Targeted Case Management (TCM), Case Management (CM) or DHS Service Worker (SW) is provided to Medicaid members who are approved to receive services through any of Iowa Medicaid's seven Home and Community Based Services (HCBS) waivers (AIDS/HIV, Brain Injury, Children's Mental Health, Ill and Handicapped, Intellectual Disability, Elderly, and Physical Disability). All State applications to provide Medicaid HCBS waiver programs must be approved by CMS. The CMS application requires that a specific entity must be identified that will provide service coordination and oversight for any Medicaid member approved to receive services through any designated HCBS waiver.

The parameters of MSS in accordance with 441 IAC 78.9(8) and 42 CFR 484.34; and the parameters for TCM, CM and service worker with 441 IAC 90 and 42 CFR 440.169 could intersect. Special consideration must be taken when the MSS service is considered for a member who is approved for an HCBS Medicaid waiver. The supports provided through the MSS service cannot duplicate the supports and the responsibilities of the TCM, CM or SW. That is, Iowa Medicaid will not pay a home health agency for MSS services when those services are already provided by TCM, CM, or SW.

It is imperative that communication is firmly established between the TCM, CM, or SW and HH agency providing the MSS service to avoid an overlap in services that will not be reimbursed by Iowa Medicaid:

- The Medicaid member and his/her HCBS interdisciplinary team, that will include the TCM, CM or SW; and the HH professional, must determine that MSS is medically necessary.
- The Medicaid member and his/her HCBS interdisciplinary team, that will include the TCM, CM or SW; and the HH professional, must determine that there will not be any duplication in the provision of MSS and the TCM, CM, or SW supports and responsibilities.

- The TCM, CM, or SW must include the MSS service in the HCBS waiver service plan and the HH professional must include the HCBS waiver services into the HH plan of care so that both reflect a fully comprehensive picture of the member's needs and supports and the services that will meet them.
- Communication and collaboration must continue throughout service provision to insure that the member receives the maximum benefit and progress from all services provided.

If you have any questions, regarding this clarification relating to the roles and responsibilities of a home health agency and a TCM, CM or SW in the provision of Medical Social Services for a recipient of HCBS Medicaid Waiver, please contact the IME Provider Services Unit at 1-800-338-7909 or locally (in Des Moines) at 256-4609, or e-mail at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).